

THE EFFECTS OF ISOTRETINOID ON FOLLICULAR AND SEBACEOUS GLAND DIFFERENTIATION. A. Dörfler, S.P. Hartshorn & R. Marks, Dept. of Medicine, University of Wales College of Medicine, Cardiff, UK.

Isotretinoin is known to reduce the rate of sebaceous secretion and to shrink sebaceous glands. How these effects are caused and whether the response in acne also depends on an effect on follicular keratinisation is unknown.

Non-lesional skin from the acne bearing area of the back from 17 acne patients was examined at 4 or 8 weeks of isotretinoin treatment. Glucose-6-phosphate dehydrogenase (G6PDH), succinic dehydrogenase (SDH) and non specific esterase (NSE) reaction products were measured in interfollicular epidermis, follicular and sebaceous epithelium, as indices of metabolic activity. Protein synthesis was assessed by a quantitative autoradiographic method using tritiated leucine. The volumes of sebaceous gland, differentiated and undifferentiated sebaceous epithelium and follicular epithelium were measured by a stereological point counting technique. Sebaceous gland cell size and hair follicle orifice area were also measured.

There was a significant reduction in the reaction products of G6PDH and SDH activities in sebaceous glands but no change in interfollicular or follicular epithelium after treatment. No change in protein synthesis could be detected. There was a significant decrease in the volume of sebaceous glands and differentiated sebaceous epithelial cells. The ratio of differentiated to undifferentiated sebaceous cells fell significantly during treatment. There was no change in the volume of the hair follicle or follicular epithelium or in the hair follicle orifice area.

The results confirm that isotretinoin reduces sebaceous gland volume and demonstrate that the glands also have a reduced metabolic activity after isotretinoin treatment. No change in follicular epithelial differentiation was detected by the methods used. Isotretinoin has been shown to alter the metabolic activity in interfollicular epidermis, indicating one difference in the mode of action of these two retinoids.

A NEW CHEMICALLY STABLE RADIO-LIGAND (CD270) AND ASSAY PROCEDURE FOR CYTOSOLIC RETINOIC ACID BINDING PROTEIN.

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The biological and therapeutic activity of retinoids is believed to be related to their ability to bind to a cytosolic protein receptor - cytosolic retinoic acid binding protein (cRABP), which participates in the nuclear translocation of the retinoids. Until now, [³H]-retinoic acid has been used to measure the binding and to quantitate the amount of cRABP in cell (or tissue) extracts. Retinoic acid (RA), however, is a very unstable molecule, sensitive to light and oxidation. This instability is increased by radiolysis, and in spite of the precautions taken, breakdown of RA is an ever-present problem. We have developed a new retinoid that can successfully substitute for retinoic acid as a ligand for cRABP. The new retinoid, 2-(5,6,7,8-tetrahydro-5,5,8,8-tetramethyl-2-naphthyl)-6-benzo-[b]-thiophene-2-carboxylic acid, coded CD270, is labelled specifically with tritium on the naphthalene moiety and has a specific activity of 7.6 Ci/mmol. This retinoid is chemically stable and insensitive to light or atmospheric oxidation.

At the same time, a new assay procedure has been developed to measure the binding to cRABP. The method allows a complete separation between the bound and free retinoid by means of gel-filtration on small columns of Sephadex G-25. A single fraction (of the cRABP-retinoid complex) is collected from each column into a scintillation counting vial. A single person can run 60-100 samples per day (4-6 binding curves). This assay is used to measure the binding in either saturation- or competition binding experiments. CD270 binds to cRABP from several sources (human, rat, mouse, bovine) with affinity similar to that of RA (K_d of about 2 nM for both). When measuring the affinities of unlabelled retinoids by competition binding, the results obtained were the same irrespective of whether RA or CD270 was used as the radioactive ligand. When cRABP was quantified in human epidermal keratinocytes and in cytosol from rat and bovine testes, again the results obtained with CD270 were similar to those obtained with RA. These experiments confirm that CD270 binds to cRABP with an affinity and specificity similar to those of RA. We propose, therefore, [³H]-CD270 as a chemically stable ligand for cRABP, that can successfully substitute for RA in most binding studies.

A NEW METHOD TO STUDY PRURITUS AND ANTI-PRURITIC DRUGS

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A major obstacle in the study of clinical itch and its therapeutic control, is the lack of accurate methods for its measurement. In this study we have used a new method based on a micro-computer (Pain-Track*) in an attempt to increase reliability and to minimise of subjective ratings of pruritus. Pain-Track is a portable data logger (8.5x14x2.5 cm; 300 g). With a standard battery of 9.5 V, a continuous recording for at least 8 weeks can be made. Every 60 min. a buzzer commands the patient to mark his presence on a marker button and rate the itch intensity on a knob with a fixed point scale from 0 to 4 (0=no and 4=maximal itch). During nighttime the hourly buzzer can be turned off. But the intensity rate knob can still be changed whenever wanted. When the recordings are finished the data logger is plugged into a desk-top computer for storage and analysis of the collected information.

In a double-blind, cross-over study 30 adult outpatients with persistent atopic dermatitis were treated with betamethasone dipropionate or its corresponding cream base. We measured the itch intensity during each period (4 days) of treatment, both continuously by Pain-Track and retrospectively each day by conventional diary cards. The overall compliance with Pain-Track was 90%. In 19 of the 29 pts who had a compliance rate of >80% the itch intensity measured by Pain-Track was less during active treatment than during placebo. In many cases the decreased itch was recorded already during the first day of treatment. Moreover, there was a good correlation between the clinical picture and itch intensity.

Conclusion: By using a drug with known antipruritic effect in atopic dermatitis we have shown that Pain-Track is a useful tool for assessing clinical pruritus and the antipruritic effects of drugs. The main advantages of the new method are possibilities for: 1) frequent recordings, 2) surveillance of compliance, 3) storage and analysis of a large amount of data.

Calcium Channel Antagonists in Dermatology

Smooth muscle contraction is calcium dependent. Calcium influx into the smooth muscle cell can be blocked by a group of drugs which block the slow calcium channels. Of these drugs nifedipine, verapamil and diltiazem have powerful effects on both the coronary and peripheral vasculature - hence their use in cutaneous disorders in the aetiology of which vascular or smooth muscle spasm are implicated.

Nifedipine has been most extensively used in Raynaud's phenomenon. It must now be regarded as a first-line drug in the management of severe symptomatic Raynaud's phenomenon, providing symptomatic relief in approximately 60% of patients. In resistant patients its use in combination with prostacyclin analogues can result in symptomatic relief and improvement of cutaneous blood flow.

Severe chronic idiopathic pemphigus has hitherto been resistant to therapy but recently nifedipine (total dose 60 mg orally daily) has been demonstrated to relieve symptoms, promote healing and prevent occurrence of further lesions in approximately 70% of patients with previously unremitting disease.

The severe pain of leishmaniasis has also been relieved by nifedipine in a small number of patients and its use in this disorder merits further investigation.

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Notices

IMPROVEMENT AND VALIDATION OF IN-VITRO METHODS FOR ROUTINE TESTING IN DERMATO-TOXICOLOGY.

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The use of animals in biological experiments as well as in dermato-toxicological investigations worldwide has become an issue of intensive public discussion. In contrast to an increasing number of papers on new alternative methods for RUM (Refinement, Reduction, Replacement) of animal experiments, there is a lack of in-vitro systems which have been validated sufficiently to justify their use in routine testing. Based upon recent work in our own laboratory and on previous papers by other authors three in-vitro systems of different complexity were selected for standardization and validation in a two year collaborative study, sponsored by the Federal Ministry for Research and Technology: a) cell culture; b) skin culture; c) chorion allantoic membrane (CAM) of incubated hen's eggs. All these systems proved to be suitable for routine testing. Cell and skin cultures provide good results when used for comparative testing within the same class of chemicals. But both methods have limitations with respect to chemical and physical properties of the products and chemicals to be tested. Best results were obtained with the chorionallantoic membrane. As this system seems most appropriate for further standardization with the aim to replace animal tests for skin and eye irritancy, further studies on improvement of evaluation methods and on defining a system of yardstick chemicals are performed presently. It is obvious, that no in-vitro system can be expected to meet all requirements of all different problems. But for a lot of aspects of testing for local effects there is a good chance to replace animal tests by CAM-testing in the near future.

INTERFERONS IN DERMATOLOGY. G. Mahrie, H.-J. Schulze,
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Interferons (IFN) modulate proliferation, differentiation and HLA-DR expression. Clinical studies on the effect of Interferons proved some benefit regarding the treatment of viral infections and skin tumors, such as melanoma and basal cell carcinoma.

We report on (1) the effect of rIFN-gamma on growth, differentiation, and AMH-activity of cultured keratinocytes and (2) its influence on HLA-DR expression and DNA-synthesis in psoriatic epidermis. We present our results obtained by two clinical trials, (A) phase I/II study on the effect of rIFN-alpha in AIDS and AIDS-related Kaposi's sarcoma (n = 24) and (B) phase I/II study on the effect of rIFN-gamma in 28 patients with melanoma, arthropathic psoriasis, condylomata acuminata, epidermolytic verruciformis, bowenoid papulosis, Behcet's disease, and mycosis fungoides.

IFN inhibited cell growth of keratinocytes in vitro but not in vivo in psoriatic epidermis. IFN-gamma induced expression of HLA-DR in keratinocytes in vitro as well as in vivo. rIFN-alpha caused regression of Kaposi's sarcoma in some cases but did not influence immunodeficiency. rIFN-gamma was of some benefit in the treatment of genital warts, bowenoid papulosis, and Behcet's disease but there was no response of psoriasis.

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CELL CULTURE MODELS IN SKIN PHARMACOLOGY AND TOXICOLOGY. Ute Reichen, Rainer Schmidt and Graham Shreeve, Centre International de Recherches Dermatologiques (CIRD), Sophia Antipolis, 06565 Valbonne Cedex, France.

Human cells in culture are being used with increasing frequency as *in vitro* models for studying toxicological and pharmacological mechanisms at the cellular level. Changes in cellular properties such as the adhesiveness of anchorage-dependent cells to their culture support, cell membrane permeability, respiratory and overall metabolic activity as well as the capacity of the cells to proliferate or differentiate have been monitored under the influence of a given drug by measuring, for example, cell detachment, release of intracellular material (ATP, enzymes, DNA), exclusion of trypan blue or uptake of vital dyes, alterations in gas exchange and heat production as well as thymidine incorporation or the expression of specific differentiation markers.

In the present review the usefulness of the cell culture approach will be discussed by comparing the dose response of transformed human keratinocytes *in vitro* to different antiproliferative treatments (anthralin, PUVA, glucocorticoids and retinoids) with data obtained under therapeutic conditions *in vivo*. The following cellular parameters are taken into consideration: cell detachment, thymidine incorporation, glutamine disimilation and cornified envelope competence as measures, respectively, of cytotoxicity, proliferative activity, cellular response and the capacity of the cells to undergo terminal differentiation.

The results indicate that, at therapeutic concentrations, anthralin and PUVA exert their antiproliferative action via their cytotoxic potential by either inhibiting cellular respiration or DNA replication, whereas retinoids and glucocorticoids do not act directly as cytotoxic drugs but rather modulate the equilibrium between epidermal proliferation and differentiation by as yet unknown mechanisms. Furthermore, our data support the view that cell culture systems can provide a useful tool for the screening of new chemical derivatives of certain drugs.

USE OF AIR-EXPOSED KERATINOCYTE CULTURE FOR PHARMACOLOGICAL PURPOSES.

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Using a conventional (submerged) culture, keratinocytes undergo differentiation, although to a degree which is lower than that seen under the *in vivo* situation. When cultured at the air-liquid interface using dead de-epithelialized dermis (DED) as a substrate, keratinocytes were found to express morphological features of differentiation similar to those seen *in vivo*. Therefore, the latter system offers an attractive model for studying the processes involved in the regulation of epidermal differentiation and the effects of drugs on it.

The analysis of the lipid composition of normal keratinocytes cultured on DED revealed a great similarity of lipid pattern with that seen under the *in vivo* conditions. In contrast to cells cultured in a submerged culture system, which contain relatively large amounts of phospholipids and low quantities of ceramides, cells cultured on DED contain low amounts of phospholipids and high amount of sterols and ceramides, especially of acylceramides. Under both culture conditions, however, linoleic acid was present in much smaller quantities as compared to the *in vivo* situation.

Administration of retinoic acid (RA) to both normal and malignant (squamous carcinoma cells (SCC)), keratinocytes induced marked changes in the morphology of cells when cultured on DED. In normal keratinocytes the administration of RA led to an increase of a number of cell layers accompanied by a loss of the granular layer. Furthermore, the horny layer was transformed to a parakeratotic layer and also keratinization of individual cells was observed. In contrast to normal keratinocytes the addition of RA markedly reduced the number of cell layers of all three SCC studied. The morphology of these cells, however, was not significantly altered. These results suggest that similarly to the *in vivo* situation RA exerts distinctively different effects on the proliferation and differentiation of normal keratinocytes as compared to SCC cells.

COMPARATIVE TOXICITY OF ANTIMICROBIAL AGENTS ON TRANSFORMED HUMAN KERATINOCYTES

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Experimental data suggest that some antimicrobial agents may have an adverse effect on several aspects of the tissue repair process including retardation of wound epithelialization. The aim of this study was to investigate the comparative cytotoxic effects of a range of antiseptics and antibiotics using human keratinocytes transformed by Simon virus 40 (SVK40 cells).

SVK40 cells were grown to semi-confluence by adding 6×10^5 cells per petri dish. After 48 hours the cells were exposed to serial dilutions of the therapeutic concentrations (in parentheses) of each of the following agents: hydrogen peroxide (3%), ceramide (20), sodium hypochlorite (0.5%), povidone iodine (5%), neomycin (1%), bacitracin (50 units/ml), polymyxin B sulphate (10,000 units/ml). The cells were exposed to the drug for 15 minutes and then washed and incubated in the culture medium (RPMI 1640 plus 10% fetal calf serum) for 24 hours. Dead cells were then washed off and the viable adherent cells were trypsinized and counted in a Coulter counter.

At therapeutic concentrations none of the antibiotics were found to be cytotoxic whereas all of the antiseptics produced 100% killing of SVK40 cells. Dilutions of therapeutic concentrations of the antiseptics ranging between 1000- and 20,000-fold (depending on the agent) were needed in order to achieve no-effect levels. Calculations based on 100% killing values for the antiseptics indicate that their order of toxicity from highest to lowest is: sodium hypochlorite, ceramide, povidone iodine and hydrogen peroxide.

We conclude that this cell line may be useful in studying the epithelial cytotoxicity of drugs *in vitro* and that care should be exercised in the selection of antimicrobial agents for use in wound management.

INFLUENCE OF DERMAL FIBROBLASTS ON EPIDERMALIZATION

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We recently describe a method of epidermalization *in vitro* that permits to obtain a well differentiated human epidermis and to study the epidermalization (1). With this human living skin equivalent model, composed as *in vivo* of a dermis and an epidermis, we could demonstrate that fibroblasts from patients with the hyperproliferation of normal keratinocytes (2). In this study, we investigated the influence of normal dermal fibroblasts on epidermalization.

Normal human dermal fibroblasts are combined with collagen, serum and culture medium. Almost immediately a gel forms which the fibroblasts begin to contract. Within a few days, the contraction is stabilized and a tissue of firm consistency is formed: the dermal equivalent (DE) (3). In this three dimensional collagen matrix, fibroblasts are in a state of differentiation similar to that observed *in vivo* (4). At different steps of the rearrangement of the collagen matrix by fibroblasts, cells are killed by an osmium shock. Six subtypes of different consistency can be made, in which fibroblasts can be alive or dead. Epidermalization is then initiated by seeding on these substrates either very thin (1 mm) or thicker skin punch biopsies (epidermis and superficial dermis) or 2 mm in diameter biopsies made in suction blister and (epidermis alone).

The epidermalization is better on a collagen matrix that have been previously reorganized by the fibroblasts, than on a simple collagen gel.

The presence of the fibroblasts of the biopsy promotes the epidermalization when no living fibroblasts are in the DE, but this effect is masked when fibroblasts are alive in the DE.

For a same collagen texture, the epidermalization is promoted when the fibroblasts of the dermal equivalent are alive.

Thus fibroblasts influence the epidermalization, they not only remodel the extracellular matrix, but also secrete growth factors. These results underline the importance of the fibroblasts in the dermal-epidermal interactions and the living skin equivalent provides to study these interactions. Because this human skin equivalent can be made simple or complex, the effects of pharmacological agents on epidermalization can be evaluated in this culture model either by their action on keratinocytes themselves or through the treatment of the dermal fibroblasts.

(1) Coudane et al. Br. J. of Dermatol., 114, 91-101, (1986). (2) Saing et al. Science, 230, 669-672, (1985). (3) Heil et al. Proc. Natl. Acad. Sci. USA, 76, 1274-1278, (1979). (4) Coudane et al. Br. J. of Dermatol., 111, suppl. 27, 83-87, (1984).

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